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DEINICAL CORRESPONDENCE	ADDRESS (Note: Use Block) for	eny change of address)	I		s ceruticale cân I naner, such as	an assignment	omestic mailings of the any other accompanying or formal drawing, must
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Emeryville, CA 946	62-8097			Joy M. Marshall			(Depositor's name)
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09/758,575	01/09/2001	<u> </u>	Joerg Kaufmann		59516-216/PP	-01656.002	9437
TITLE OF INVENTION: GE	NES DIFFERENTIALLY	EXPRÉSSED IN	BREAST CANCER				
APPLN. TYPE	SMALL ENTITY 1	SSUE FER DUE	PUBLICATION FEE D	UE PREV. PAID ISSU		L FEG(S) DUE	DATE DUE -
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HARRIS, ALA	NA M	1643	435-325000		C:8001	30.00 DA	
Address form PTO/SB/1. "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required.	lence address (or Change of 22) attached, ion (or "Fee Address" Indi or more recent) attached. U	Cation form	(1) the names of or agents OR, alte (2) the name of a registered attorned 2 registered patentiated, no name with the control of the control o	single firm (having as y or agent) and the nan antorneys or agents. If Il be printed.	nt attorneys a member a nes of up to	Lisa Al 2 Patrici 3	exander a Tsao
(A) NAME OF ASSIGN	an assignee is identified a 37 CFR 3.11. Completion	below, no assigned n of this form is NO	e dara will appear on OT a substitute for filin (B) RESIDENCE: (or type) the parent. If an assig g an assignment. CITY and STATE OR Emeryville,	nee is identific COUNTRY) CA	d below, the do	cument has been filed for
Please check the appropriate			orinted on the natent).		Comoration or o	ther private gro	up entity Government
4a. The following fee(s) are	submitted:		th. Payment of Fee(s): A check is enclo	(Picase first reapply a sed. https://www.pro-203	any previously 38 is attached, arge the require ber 03-166	paid issue fee s d fee(s), any dei	
5. Change in Entity Status	(from status indicated abo	ove)			03-160		FR 1 27(a)(2)
a. Applicant claims S	MALL ENTITY SIAMS. S	ee 37 CFR 1.27.	b. Applicant is t	o longer claiming SM.	gistered attorne	y or ugent; or th	e assignee or other party in
NOTH: The Issue Fee and I interest as shown by the rec	ords of the Mixed States I	atent and Tradema	rk Office.				
Authorized Signature	1) North				eptember		
Typed or printed name	Mark SEka				No44,3		
This collection of informat an application, Confidentia submitting the completed this form and/or suggestion Box 1450, Alexandria, Vir Alexandria, Virginia 22313 Under the Paperwork Redu	ion is required by 37 CFR lity is governed by 35 U.S. application form to the US for for requesting this burden gris 22313-1450. DO NO 1450. action Act of 1995, no pers	I.311. The informa 6.C. 122 and 37 CF PTO. Time will va 6. should be sent to 0.T SEND FEES Of ons are required to	tion is required to obta R 1.14. This collection ry depending upon the the Chief Information R COMPLETEO FOR respond to a collection	in or retain a benefit b is estimated to take I individual case. Any Officer, U.S. Parent a MS TO THIS ADDRE of information unless	y the public whi 2 minutes to co comments on to d Trademark C SS. SEND TO: it displays a val	ich is to file (and mplete, includir he amount of tip Office, U.S. Dep Commissioner lid OMB control	I by the USPTO to process ig gathering, preparing, and me you require to complete aronem of Commerce, P.O. for Patents, P.O. Box 1450 I number.

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T-306 P:002/003 F-622

__Sep-11-09

02:02pm From-Novartis V&D IP Dept

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Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450

SEP 1 1 2009

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depositor's name)	Joy M. Marshall
(Signature)	Joy M. Marchell
(Dulc)	September 11, 2009

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/758.575	01/09/2001	Joerg Kaufmann	59516-216/PP-01656.002	9437

TITLE OF INVENTION: GENES DIFFERENTIALLY EXPRESSED IN BREAST CANCER

APPLN. TYPÉ	SMALL ENTITY	155UE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATEDUE	
nonprovisional	NO	\$1510	\$300	\$0	\$1810	09/14/2009	
EXAMINER		ART UNIT	CLASS-SUBCLASS			•	
HARRIS,	ALANA M	1643	435-325000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. 3. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered attorneys or agents. If no name is listed, no name will be printed.				
PLEASE NOTE: Us recordation as set for (A) NAME OF ASS NOVARTIS	nless an assignee is iden th in 37 CFR 3.11. Com IGNEE Vaccines and	tified below, no assignee pletion of this form is NO Diagnostics, I		atent. If an assignee is in assignment. and STATE OR COUNT eryville, CA	TRY)		
) are submitted: No small entity discount # of Copies10			d. Form PTO-2038 is atta authorized to charge the sit Account Number	nched. required fee(s), any defic 		
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.			O 3 - 1 6 (6 4 □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).				
NOTE: The Issue Fee a interest as shown by the	nd Publication Fee (if records of the Whiten St	quired) will not be accepte ates Patent and Trademarl	ed from anyone other than t k Office.	he applicant; a registered	attorney or agent; or the a	assignee or other party i	
Authorized Signatur	7/ h 7/ W			Date Septem	ber 11, 2009	 	
Typed or printed name Mark SEka			Registration No. 44,330				

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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